DATE:

June 28, 2012

SUBJECT:

Addendum No. One to the Specifications and Drawings for the waterproofing of the ATCT in

Sanford, FL.

This Addendum modifies and takes precedence over the original Specifications and Drawings and forms a part of the contract documents.

# Add the following

1A.2 SCOPE OF WORK: The work consists of but is not limited to the following:

Some work must be done during a time when it does not interfere with the performance of the duties of the controllers at this facility.

Cab Roof: The work will be done at normal hours 7.30 AM to 4.00 pm. If the contractor is not using a crane to bring material to the cab roof then the delivery of the material need to take place between 11.00PM-6.00AM.

The parapet wall cap coating need to be take place after 6.00 pm.

The Catwalk elastomeric and grout work removal work need to be done between 11.00PM-6.00AM. The installation of the new material will be done during normal hours after air intakes and access opening are being seal.

The Base building Roof and exterior work: The work will be done during normal hours 7.30 AM to 4.00 pm.

Base Building Interior work can be done between 5.00PM-6.00AM.

Tower Interior work can be done at normal hours.

#### Cab Roof:

- 1. Clean existing roof surface, then clean, remove and reinstall to the side of the parapet wall the lightning arresters, associated clamps and cables on the cab roof. (Reuse the existing hardware and material but buy clip for the side installation)
- 6. Clean the two existing drain bowls, ring and cover strainer from any contaminant, then paint the rings and replace steel bolts with stainless steel ones. Replace the target sheet and seal the bowl with waterproof sealant recommended by the manufacturer
- 7. Install walkway pad in the same pattern as the existing. (Entire roof but do not cover the seams, cover strip & SEE SPECS and drawings)
- 8. Cover the parapet wall cap with Parapro 123 and any penetration need to be flash after the cap surface has been clean and rust remove.

Scope: Cab roof parapet wall cap needs to be cover with reinforce liquid coat resin. (Parapro 123by Siplast) As show in the enclose detail.

# Material:

- a) Polyester Fleece 12" by 16'
- b) Activation resin
- c) PMMA flashing resin that cover 16 sq. ft. finish product
- d) Cleaning Solution/Solvent: A clear solvent used to clean and prepare transition areas of in-place catalyzed resin to receive subsequent coats of resin and to clean substrate materials to receive resin. Pro Prep by Siplast; Irving, TX

Application will be in the summer and need to meet the manufacturer recommendation.

# Surface preparation:

8" around any penetration, seam and rusted pinholes. The surface need to be clean rust, old paint, grease or any contaminant. The surrounded eight inches around this of this area need to be bare metal.

The Metal Cap must be clean, of dry, loose material or any foreign material that would be detrimental the adhesion of the catalyzed primer. Remove rust or oxidation layer.

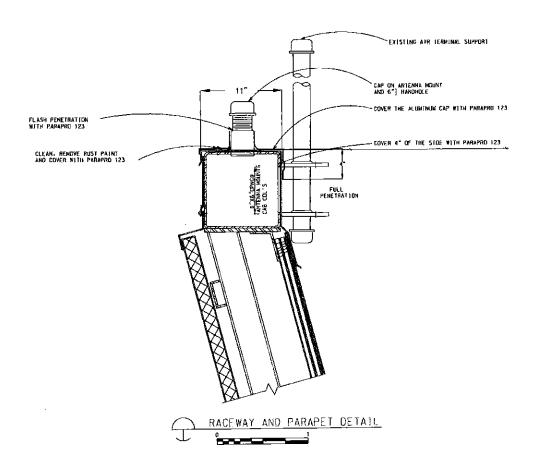
- 1. Lightly abrade surface prior to clean with pro prep.
- 2. Wipe down thoroughly with pro prep prior to coating. Allow 20 minutes of drying time after application before continuing. The coating should be completed within 60 minutes of cleaning with pro prep.

Installation: Fallow manufacturer direction at <a href="http://freedownload.is/pdf/parapro-123-flashing-installers-guide-7015753.html">http://freedownload.is/pdf/parapro-123-flashing-installers-guide-7015753.html</a>

#### Protection for the tower:

The time of application in the afternoon after 6.00 pm, surface preparation at normal hours.

All air intakes and opening the cab need to be close and seal when this work takes place.



# Clarifications

# What areas need to be painted at the base building interior entrance?

Only the two columns that need the drywall replace. No hallway walls. Refer to Drawings.

# Will we have electrical outlet in the cab?

The Cab roofs have a spec rated 120-20 amp outlet. If the contractor required 220 service we identified an electrical panel at the junction level. The contractor needs to contract a license electrician to install and remove the temporary service to our panel.

General Decision Number: FL120038 07/06/2012 FL38

Superseded General Decision Number: FL20100137

State: Florida

Construction Type: Building

County: Seminole County in Florida.

BUILDING CONSTRUCTION PROJECTS (does not include single family

homes or apartments up to and including 4 stories).

Modification	Number	Publication	Date
0		01/06/2012	
1		02/03/2012	
2		07/06/2012	

BRFL0001-002 05/01/2010

BRFL0001-002 05/01/2010		
	Rates	Fringes
TILE SETTER	\$ 18.50	6.00
CARP1765-002 05/01/2009		
	Rates	Fringes
CARPENTER (Excluding Acoustical Ceiling, Drywall Hanging and Form Work)	\$ 22.46	7.05
ENGI0673-003 05/01/2010		
	Rates	Fringes
OPERATOR: Mechanic OPERATOR: Oiler OPERATOR: Boom Truck	\$ 19.27	8.80 8.80 8.80
IRON0808-007 07/01/2009	<b>-</b>	
	Rates	Fringes
IRONWORKER, STRUCTURAL AND ORNAMENTAL	\$ 23.00	9.95
* PAIN1010-004 08/01/2010		
	Rates	Fringes
PAINTER: Brush, Roller, Spray and Steel, Excludes Drywall Finishing/Taping		7.40
* SFFL0821-001 07/01/2012		<b></b>
	Rates	Fringes
SPRINKLER FITTER (Fire Sprinklers)	\$ 27.93	16.44

<sup>\*</sup> SHEE0015-002 07/01/2011

	Rates	Fringes
SHEET METAL WORKER (HVAC Duct Installation Only)		12.63
* SUFL2009-034 05/22/2009		
	Rates	Fringes
ACOUSTICAL CEILING MECHANIC	.\$ 14.84	0.13
BRICKLAYER	.\$ 19.32	0.00
CARPENTER (Form Work Only)	.\$ 10.00	0.00
CEMENT MASON/CONCRETE FINISHER	.\$ 20.00	0.00
DRYWALL FINISHER/TAPER	.\$ 16.00	0.00
DRYWALL HANGER	.\$ 15.81	0.89
ELECTRICIAN	.\$ 15.05	0.99
FENCE ERECTOR	.\$ 14.00	0.00
GLAZIER	.\$ 16.07	6.24
INSTALLER - CARPORT METAL COVERING	.\$ 12.17	0.77
INSTALLER - DRAPERY BLINDS	.\$ 17.50	0.00
INSULATOR - BATT	.\$ 15.79	0.00
INSULATOR - PIPE & PIPEWRAPPER	.\$ 13.13	3.03
IRONWORKER, REINFORCING	.\$ 14.00	0.00
LABORER: Asphalt Shoveler	.\$ 7.88	0.00
LABORER: Common or General	.\$ 10.04	0.00
LABORER: Concrete Saw (Hand Held/Walk Behind)	.\$ 12.63	0.00
LABORER: Mason Tender - Brick	.\$ 10.00	0.00
LABORER: Mason Tender - Cement/Concrete	.\$ 12.83	1.90
LABORER: Pipelayer	.\$ 11.53	0.00
LABORER: Roof Tearoff	.\$ 9.00	0.00
LABORER: Landscape and Irrigation	.\$ 9.60	0.00
LATHER	.\$ 13.41	0.00
OPERATOR: Asphalt Spreader	.\$ 11.41	0.00
OPERATOR: Backhoe/Excavator	.\$ 15.00	0.47

OPERATOR:	Bulldozer\$	15.00	0.00
OPERATOR:	Crane\$	17.75	0.00
OPERATOR:	Distributor\$	12.37	0.00
OPERATOR:	Forklift\$	14.00	0.00
OPERATOR:	Grader/Blade\$	11.00	0.63
OPERATOR:	Loader\$	11.00	0.63
OPERATOR:	Paver\$	12.83	0.00
OPERATOR:	Pump\$	17.12	0.00
OPERATOR:	Roller\$	10.68	0.00
OPERATOR:	Screed\$	11.34	0.00
OPERATOR:	Tractor\$	9.91	0.00
OPERATOR:	Trencher\$	11.75	0.00
	Excludes HVAC	16.02	0.52
PLASTERER	\$	16.00	0.67
	ncludes HVAC Pipe	17.10	0.00
	stallation of Metal	14.26	0.59
Hot Tar, Mc Shake & Shi	cludes Built Up, odified Bitumen, ingle, Single Ply,		
	ile Roofs (Excludes on of Metal Roofs)\$	14.65	1.53
SCAFFOLD BU	JILDER\$	12.00	0.00
	WORKER, Excludes Installation\$	14.10	1.53
TRUCK DRIVE	ER: Dump Truck\$	10.00	0.00
TRUCK DRIVE	<b>-</b>	12.09	0.00

WELDERS - Receive rate prescribed for craft performing operation to which welding is incidental.

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Unlisted classifications needed for work not included within the scope of the classifications listed may be added after award only as provided in the labor standards contract clauses (29CFR 5.5 (a) (1) (ii)).

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The body of each wage determination lists the classification and wage rates that have been found to be prevailing for the cited type(s) of construction in the area covered by the wage determination. The classifications are listed in alphabetical order of "identifiers" that indicate whether the particular rate is union or non-union.

#### Union Identifiers

An identifier enclosed in dotted lines beginning with characters other than "SU" denotes that the union classification and rate have found to be prevailing for that classification. Example: PLUM0198-005 07/01/2011. The first four letters, PLUM, indicate the international union and the four-digit number, 0198, that follows indicates the local union number or district council number where applicable, i.e., Plumbers Local 0198. The next number, 005 in the example, is an internal number used in processing the wage determination. The date, 07/01/2011, following these characters is the effective date of the most current negotiated rate/collective bargaining agreement which would be July 1, 2011 in the above example.

Union prevailing wage rates will be updated to reflect any changes in the collective bargaining agreements governing the rate.

#### Non-Union Identifiers

Classifications listed under an "SU" identifier were derived from survey data by computing average rates and are not union rates; however, the data used in computing these rates may include both union and non-union data. Example: SULA2004-007 5/13/2010. SU indicates the rates are not union rates, LA indicates the State of Louisiana; 2004 is the year of the survey; and 007 is an internal number used in producing the wage determination. A 1993 or later date, 5/13/2010, indicates the classifications and rates under that identifier were issued as a General Wage Determination on that date.

Survey wage rates will remain in effect and will not change until a new survey is conducted.

### WAGE DETERMINATION APPEALS PROCESS

- 1.) Has there been an initial decision in the matter? This can be:
- \* an existing published wage determination
- \* a survey underlying a wage determination
- \* a Wage and Hour Division letter setting forth a position on a wage determination matter
- \* a conformance (additional classification and rate) ruling

On survey related matters, initial contact, including requests for summaries of surveys, should be with the Wage and Hour Regional Office for the area in which the survey was conducted because those Regional Offices have responsibility for the Davis-Bacon survey program. If the response from this initial

contact is not satisfactory, then the process described in 2.) and 3.) should be followed.

With regard to any other matter not yet ripe for the formal process described here, initial contact should be with the Branch of Construction Wage Determinations. Write to:

Branch of Construction Wage Determinations Wage and Hour Division U.S. Department of Labor 200 Constitution Avenue, N.W. Washington, DC 20210

2.) If the answer to the question in 1.) is yes, then an interested party (those affected by the action) can request review and reconsideration from the Wage and Hour Administrator (See 29 CFR Part 1.8 and 29 CFR Part 7). Write to:

Wage and Hour Administrator U.S. Department of Labor 200 Constitution Avenue, N.W. Washington, DC 20210

The request should be accompanied by a full statement of the interested party's position and by any information (wage payment data, project description, area practice material, etc.) that the requestor considers relevant to the issue.

3.) If the decision of the Administrator is not favorable, an interested party may appeal directly to the Administrative Review Board (formerly the Wage Appeals Board). Write to:

Administrative Review Board U.S. Department of Labor 200 Constitution Avenue, N.W. Washington, DC 20210

4.) All decisions by the Administrative Review Board are final.

END OF GENERAL DECISION

#### DATE BOND EXECUTED (Must be same or later than date of 9000-0045 OMB No.: PERFORMANCE BOND contract) Expires: 11/30/2012 (See instructions on reverse) Public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the FAR Secretariat (MVR), Federal Acquisition Policy Division, GSA, Washington, DC 20405 PRINCIPAL (Legal name and business address) TYPE OF ORGANIZATION ("X" one) INDIVIDUAL PARTNERSHIP JOINT VENTURE CORPORATION STATE OF INCORPORATION SURETY(IES) (Name(s) and business address(es) PENAL SUM OF BOND HUNDRED(S) CENTS THOUSANDS MILLION(S) CONTRACT DATE CONTRACT NO. **OBLIGATION** We, the Principal and Surety (ies), are firmly bound to the Unites States of America (hereinafter called the Government) in the above penal sum. For payment of the penal sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally. However, where the Sureties are corporations acting as co-sureties, bind ourselves in such sum "jointly and severally" as well as "severally" only for the purpose of allowing a joint action against any or all of us. for all other purposes, each Surety binds itself, jointly and severally with the Principal, for the payment of the sum shown opposite the name of the Surety. If no limit of liability is indicated, the limit of liability is the full amount of the penal sum. CONDITIONS The Principal has entered into the contract identified above. **THEREFORE** The above obligation is void if the Principal-(a)(1) Performs and fulfills all the undertaking, covenants, terms, conditions, and agreements of the contract during the original term of the contract and any extensions thereof that are granted by the Government, with or without notice of the Surety(ies) and during the life of any guaranty required under the contract, and (2) performs and fulfills all the undertakings, covenants, terms conditions, and agreements of any and all duly authorized modifications of the contract that hereafter are made. Notice of those modifications to the Surety(les) are waived. Pays to the Government the full amount of the taxes imposed by the Government, if the said contracts is subject to the Miller Act, (40 U.S.C. 270a-270e), which are collected, deducted, or withheld from wages paid by the Principal in carrying out the construction contract with respect to which this bond is furnished. WITNESS The Principal and Surety(ies) executed this performance bond and affixed their seals on the above date. **PRINCIPAL** 2. 3. SIGNATURE(S) (Seal) (Seal) (Seal) Corporate 2. 1. Seal NAME(S) & TITLE(S) (Typed) INDIVIDUAL SURETY(IES) SIGNATURE(S) (Seal (Seal NAME(S) (Typed) **CORPORATE SURETY(IES)** LIABILITY LIMIT (\$) STATE OF INC. NAME & **ADDRESS** ⋖ Corporate SURETY 2. SIGNATURE(S) Seal

2.

NAME(S) & TITLE(S (Typed)

		CORPORA	ATE SURETY(IES) (Continued)		
ш	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT (\$)	
SURETY	SIGNATURE(\$)	1.	2.		Corporate Seal
sol	NAME(S) & TITLE(S) (Typed)	1.	2.		
ပ	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT (\$)	
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal
sni	NAME(S) & TITLE(S) (Typed)	1.	2.		
	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT (\$)	
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal
S	NAME(S) & TITLE(S) (Typed)	1.	2.		
ш	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT (\$)	
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal
sn	NAME(S) & TITLE(S) (Typed)	1.	2.		100000
	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT (\$)	
SURETY F	SIGNATURE(S)	1.	2.		Corporate Seal
SUS	NAME(S) & TITLE(S) (Typed)	1.	2.		
_ <del>_</del>	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT (\$)	
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal
SUR	NAME(S) & TITLE(S) (Typed)	1.	2.		
		BOND PREMIUM	THOUSAND (\$) TOTA	L (\$)	

#### **INSTRUCTIONS**

- 1. This form is authorized for use in connection with Government contracts. Any deviation from this form will require the written approval of the Administrator of General Services.
- 2. Insert the full legal name and business address of the Principal in the space designated "Principal" on the face of the form. An authorized person shall sign the bond. Any person signing in a representative capacity (e.g., and attorney-in-fact) must furnish evidence of authority if that representative is not a member of the firm, partnership, or joint venture, or an officer of the corporation involved.
- 3. (a) Corporations executing the bond as sureties must appear on the department of the Treasury's list of approved sureties and must act within the limitation listen therein. Where more than one corporate surety is involved, their names and addresses shall appear in the spaces (Surety A, Surety B, etc.) headed "CORPORATE"

- SURETY(IES)." In the space designated "SURETY(IES)" on the face of the form, insert only the letter identification of the sureties.
- (b) Where individual sureties are involved, a completed Affidavit of Individual Surety (standard Form 28) for each individual surety, shall accompany the bond. The Government may require the surety to furnish additional substantiating information concerning their financial capability.
- 4. Corporation executing the bond shall affix their corporate seals. Individual shall execute the bond opposite the word " Corporate Seal", and shall affix an adhesive seal if executed in Maine, New Hampshire, or any other jurisdiction requiring adhesive seals.
- 5. Type the name and title of each person signing this bond in the space provided.

# PAYMENT BOND (See instructions on reverse)

DATE BOND EXECUTED (Must be same or later than date of contract)

OMB No.:9000-0045 Expires: 11/30/2012

Public reporting burden for this collection of information is estimate to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the FAR Secretariat (MVR), Federal Acquisition Policy Division, GSA, Washington, DC 20405.

PRINCIPAL (Legal name and business address)	TYPE OF ORGANIZATION ("X" one)					
	☐ INDIVIDUA	AL .		PARTNERS	HIP	
	☐ JOINT VENTURE ☐ CORPORATION					
	STATE OF INCORPORATION					
SURETY(IES) (Name(s) and business address(es)	PENAL SUM OF BOND					
	MILLION(S)	THOUSAN	VD(S)	HUNDRED(S)	CENTS	
	ļ					
	CONTRACT DA	TE	CONT	RACT NO.		

#### **OBLIGATION:**

We, the Principal and Surety(ies), are firmly bound to the United States of America (hereinafter called the Government) in the above penal sum, for payment of the penal sum, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally. However, where the Sureties are corporations acting as co-sureties, we, the Sureties, bind ourselves in such sum "jointly and severally" as well as "severally" only for the purpose of allowing a joint action or actions against any or all of us. For all other purposes, each Surety binds itself, jointly and severally with the Principal, for the payment of the sum shown opposite the name of the Surety. If no limit is indicated, the limit of liability is the full amount of the penal sum.

#### CONDITIONS:

The above obligation is void if the Principal promptly makes payment to all persons having a direct relationship with the Principal or a subcontractor of the Principal for furnishing labor, material or both in the prosecution of the work provided for in the contract identified above, and any authorized modifications of the contract that subsequently are made. Notice of those modifications to the Surety(ies) are waived.

#### WITNESS:

The Principal and Surety(ies) executed this payment bond and affixed their seals on the above date.

_					PRINCIPA	AL				
SIG	NATURE(S)	1.	(Seal)	2.		(Seal)	3.		(Seal)	Corporate
TIT	ME(S) & LE(S) ned)	1.		2.		_	3.			Seal
				IND	DIVIDUAL SUF	RETY(IES	)			
SIG	NATURE(S)	S) 1. (Seal) 2.				(Seal)				
NAME(S) 1 (Typed)		1.				2.				
				COI	RPORATE SU					
<b>←</b>	NAME & ADDRESS		<del>-</del>	_		STATE OF	INC.	LIABILITY LIMIT		
SURETY	SIGNATURE(S)	1.				2.		· 		Corporate Seal
S	NAME(S) & TITLE(S) (Typed)	1.				2.				

		CORPORATE SI	JRETY(IES) (Continue	ed)	
<b>m</b>	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT	
SURETY	SIGNATURE(\$)	1.	2.		Corporate Seal
S	NAME(S) & TITLE(S) (Typed)	1.	2.		
Ö	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT	
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal
ns	NAME(S) & TITLE(S) (Typed)	1.	2.		
_	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT	
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal
SU	NAME(S) & TITLE(S) (Typed)	1.	2.		
m	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT	
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal
ns	NAME(S) & TITLE(S) (Typed)	1.	2.		
ī	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT	
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal
S	NAME(S) & TITLE(S) (Typed)	1.	2.		
<u> </u>	NAME & ADDRESS		STATE OF INC.	LIABILITY LIMIT	
SURETY	SIGNATURE(S)	1.	2.		Corporate Seal
ns 	NAME(S) & TITLE(S) (Typed)	1.	2.	·	

# **INSTRUCTIONS**

- 1. This form, for the protection of persons supplying labor and material, is used when a payment bond is required under the Act of August 24, 1935, 49 Stat. 793 (40 U.S.C. 270a-270e). Any deviation from this form will require the written approval of the Administrator of General Services.
- 2. Insert the full legal name and business address of the Principal in the space designated "Principal" on the face of the form. An authorized person shall sign the bond. Any person signing in a representative capacity (e.g., an attorney-in-fact) must furnish evidence of authority if that representative is not a member of the firm, partnership, or joint venture, or an officer of the corporation involved.
- 3. (a) Corporations executing the bond as sureties must appear on the Department of the Treasury's list of approved sureties and must act within the limitation listed therein. Where more than one corporate surety is involved, their names and addresses shall appear in the spaces (Surety A, Surety B, etc.) headed "CORPORATE SURETY(IES)."

- In the space designated "SURETY(IES)" on the face of the form, insert only the letter identification of the sureties.
- (b) Where individual sureties are involved, a completed Affidavil of Individual Surety (Slandard Form 28) for each individual surety, shall accompany the bond. The Government may require the surety to furnish additional substantiating information concerning their financial capability.
- 4. Corporations executing the bond shall affix their corporate seals. Individuals shall execute the bond opposite the word "Corporate Seal", and shall affix an adhesive seal if executed in Maine, New Hampshire, or any other jurisdiction requiring adhesive seals.
- 5. Type the name and title of each person signing this bond in the space provided.

# DEPARTMENT OF TRANSPORTATION CONTRACTOR'S RELEASE

CONTRACTOR'S RELEAS	E
CONTRACTOR (Name and Address)	ENTER SUM OF TOTAL OF AMOUNTS PAID AND PAYABLE
CONTRACT NO.	\$
Pursuant to the terms of the above numbered contract and in consideration of the to be paid to the Contractor, or its assignees, the Contractor, upon payment of the AMERICA (hereinafter called the Government), does remise, release, and dischargemployees, of and from all liabilities, obligations, claims, and demands whatsoever except:	said sum by the UNITED STATES OF the Government, its officers, agents, and
1. Specified claims in stated amounts or in estimated amounts where the amounts the Contractor, as follows: (or state "None")	
2. Claims, together with reasonable expenses incidental thereto, based upon the larising out of the performance of this contract, which are not known to the Contracterelease and of which the Contractor gives notice in writing to the Contracting Office contract; and	ctor on the date of the execution of this
3. Claims for reimbursement of costs (other than expenses of the Contractor by re Government against patent liability) including reasonable expenses incidental there provisions of the said contract relating to patents.	eason of his indemnification of the eto, incurred by the Contractor under any
The Contractor agrees, in connection with patent matters and with claims which are comply with all provisions of the said contract, provisions of the said contract, included in the contracting of the said contract, included in the contracting of the said contract, included in the contracting of the said contract in the contracting of the said contract in the contracting of the said contract in the said co	uding without limitation those provisions
IN WITNESSES WHEREOF, this release has been executed this day of	, 19
WITNESSES	(Contractor)
ВУ	- <del></del>
TITLE	
NOTE: In the case of a corporation, witnesses are not required but the below state	ement must be completed.
I,, am the	secretary of the corporation
named as Contractor in the foregoing release; that	
of the Contractor was then of said corporati	on; release was duly signed for and in
behalf of said corporation by authority of its governing body and is within	the scope of its corporate powers.
	Signature